

## THE RESPONSIBILITY FOR MEDICAL CARE

*The following statement of policy was adopted by the House of Delegates of the American Medical Association at its recent annual meeting in Miami Beach:*

"Personal medical care is primarily the responsibility of the individual. When he is unable to provide this care for himself, the responsibility should properly pass to his family, the community, the county, the state, and only when all these fail, to the federal government, and then only in conjunction with the other levels of government, in the above order.

The determination of medical need should be made by a physician and the determination of eligibility should be made at the local level with local administration and control. The principle of freedom of choice should be preserved. The use of tax funds under the above conditions to pay for such care, whether through the purchase of health insurance or by direct payment, provided local option is assured, is inherent in this concept and is not inconsistent with previous actions of the House of Delegates of the American Medical Association."

## EDITORIAL

### The A.M.A. 1960 Session

IN THE HEAT and humidity of Miami Beach, which even the constant breeze from the Gulf Stream could not counteract, the American Medical Association held its 1960 Annual Session in mid-June.

Whether because of weather conditions, a strike by airline pilots or other reasons, or the fact that it was held in a corner of the country, the meeting fell far below expectations and the experience of former years. Attendance was minimal and the general atmosphere seemed lacking in enthusiasm, despite an excellent scientific program and the usual stupendous array of scientific and technical exhibits.

Even on the business side, handled by the House of Delegates, lassitude was the order of the day. Where in past years there have generally emerged one or more issues of importance, the grist fed into the policy-making mill this year was relatively poor in both quality and quantity.

About 50 resolutions were placed before the House of Delegates, covering a multiplicity of subjects but mainly not constituting matters of prime importance. The one possible exception was in the field of health care for the aged, where several states made proposals for the establishment of A.M.A. actions or attitudes.

Some of the more important items handled by the House are summarized below.

**Prepayment Congress**—The House of Delegates agreed that more sessions should be held for the discussion of prepayment health insurance, with consumers, labor, management and insurance interests participating. Such a conference was recently held in Chicago and the results were gratifying to the point of planning for further regional gatherings along the same lines.

**Physicians and Social Security**—The House reaffirmed the stand taken on several previous occasions, in opposition to the compulsory inclusion of physicians under the OASDI provisions of the Social Security Act. At the same time this action was being taken in Miami Beach, the Ways & Means Committee of the House of Representatives in Washington was reporting out an omnibus Social Security amendment bill which *would require* physicians, as self-employed, to come under the Social Security banner. Apparently the voice of the A.M.A. in Florida did not carry to Washington.

**Tax Reform**—The House considered a resolution to urge A.M.A. support of a bill now before Congress to reduce corporate and personal income taxes and to establish more liberal depreciation allowances for tax purposes. While the House did not approve the resolution with these stated objectives, it did pass a substitute measure designed to "return

to the states and their political subdivisions their traditional revenue sources and to allow American citizens to enjoy the fruits of their labor." Here again it is doubtful that the A.M.A. voice carried to the national capitol.

*Physicians' Services*—A resolution was adopted to establish the phrase "physicians' services" as a part of the medical lexicon. The object of this proposal is to set forth these services as the professional portion of the total health care of the patient. If this can be accomplished, the public may be made aware of the fact that the total costs of health care include many costs in addition to the sum received by the physician.

*Health Care of the Aged*—This topic attracted more resolutions than any other at the Miami Beach session. In addition to several anti-Forand resolutions, specific proposals were advanced by Nebraska, District of Columbia, Tennessee and California.

These resolutions were referred to several reference committees and were reported upon by two. In the main the reference committee reports, adopted by the House of Delegates, followed the philosophy, if not the exact language, of the California resolution. Quotations from these reports are given here to show the parallel thinking of the A.M.A. House of Delegates and the C.M.A. Council, which approved the original resolution and asked that it be placed before the A.M.A.

One reference committee urged that the policy of the A.M.A. be as follows: "Personal medical care is primarily the responsibility of the individual. When he is unable to provide this care for himself, the responsibility should properly pass to his family, the community, the county, the state, and only when all these fail, to the federal government, and then only in conjunction with the other levels of government in the above order.

"The determination of medical needs should be made by a physician and the determination of eligibility should be made at the local level with local administration and control. The principle of freedom of choice should be preserved.

"The use of tax funds under the above conditions to pay for such care, whether through the purchase of health insurance or by direct payment, provided local option is assured, is inherent in this concept and is not inconsistent with previous actions of the House of Delegates of the American Medical Association."

From another reference committee came approval of the California resolution, which stated the same principles for the allocation of responsibility. This resolution showed that where the individual is able to provide for his own health care, "government at any level has no role." Continuing through the same steps of governmental echelons as shown above, the resolution stated that "only as a last resort is federal government participation warranted."

Also included in the resolution was the proposal that the A.M.A. "initiate a nonpartisan open assembly to which all interested representative groups are invited, for the purpose of developing the specifics of a sound approach to the health services and facilities needed by the aged, and that thereafter the American Medical Association present its findings and positive principles to the people."

While it is gratifying to have one's own suggestions approved by the national body, it is even more satisfying to see the representatives of the nation's physicians come to grips with a problem of national importance and come up with a positive program for handling it.

The resolutions approved by the House of Delegates run completely contrary to Mr. Forand's approach. The Congressman took the easy way out, by assuming that Government must intervene. If his views were to carry through Congress, the country would have upon its back a Social Security System that could have no intention, certainly, of ever getting smaller. There are already grave doubts in the minds of many thinking persons as to the soundness, both financial and philosophical, of the Social Security System. With a Forand-type hospital-surgical-nursing home amendment tacked on, the system would straddle over an even larger area and create still further tax problems for future generations.

The members of the A.M.A. House of Delegates are to be congratulated on their prompt recognition of a social problem of the day, on their calm appraisal of it in terms of human life and human dignity and on their willingness to submit the matter to the cold and searching review envisaged in the resolutions adopted.

It must be said that the medical profession encourages personal and individual initiative and, at the same time, recognizes the true role of Government when it is necessary to abdicate personal responsibilities because of inability to discharge them. Government must remain the servant of the people, not the master.